_		^							
5	CHEDULE B (FEC Form 3)	() Use seperate sch	edule(s)	FOR LINE	PAGE	263 / 2	268		
IT	EMIZED DISBURSEMENT	S for each category	of the ((check online 21b	<u> </u>		l I	_	
		Detailed Summary	Detailed Summary Page		22 X 23 28a 28b	24 28c	25 29		26 30b
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions									
or	for commercial purposes, other than using	the name and address of any	political cor	nmittee to so	blicit contributions from	such comr	nittee		
\	NAME OF COMMITTEE (In Full)								
/	MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION C	OMMITTE	EE (a.k.a. N	Medco Health PAC)				
	Full Name (Last, First, Middle Initial)				Transaction ID: E>	(P:B:400	 75		
٩.	TIBERI FOR CONGRESS	Date of Disburseme		. •					
		10 M / D 29 / Y 2007							
	Mailing Address 2021 E. DUBLIN								
	City	State Zip Co	de		Amount of Each Dis	bursemen	t this P	erioc	 t
	COLUMBUS	OH 43229	9					-	
	Purpose of Disbursement 011				1	1000.0	0		
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	Candidate Name			Category/					
	PATRICK JOSEPH TIBERI			Туре					
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	President	Other (specify)							
	State: OH Dietrict: 12								

SUBTOTAL of Disbursements This Page (optional)	•	1000.00			
TOTAL This Period (last page this line number only)	<u> </u>	32500.00			